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To: Alan Gantt From: David Domnitz
Fax: (703) 308-⁸⁷²⁻⁹³⁰⁶~~6306~~ Pages: 2 (incl. cover)
Phone: (703) 305-³⁰²⁸0077 Date: September 17, 2004
Re: PTD/SB/82 for cc:
09/546,851
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PTO/SB/82 (09-03)

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**REVOCATION OF POWER OF
ATTORNEY WITH
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/546,851
Filing Date	April 10, 2000
First Named Inventor	David Domnitz
Art Unit	2684
Examiner Name	Alan T. Gantt
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

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☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	David Domnitz				
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City	Weston	State	Florida	Zip	33327
Country	United States				
Telephone	754-366-7377	Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	David Domnitz		
Signature	David Domnitz		
Date	September 17, 2004	Telephone	754-366-7377

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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